

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 03, 2004 8:00 am
Secretary of State

05-03-2004 90679 034 ***150.00

DOCUMENT # P95000055919

1. Entity Name

SJM ENTERPRISES, INC.



Principal Place of Business

5145 HONEYNUT LANE
WINDERMERE FL 34786
US

Mailing Address

PO BOX 663
WINDERMERE FL 34786-0663
US

94079167



MOORE CR2E034 (11/03)

2. Principal Place of Business

10000 SW 52 Ave

3. Mailing Address

10000 SW 52 Ave

Suite, Apt. #, etc.

#39

Suite, Apt. #, etc.

#39

City & State

Gainesville, FL

City & State

Gainesville, FL

Zip 32608

Country USA

Zip 32608

Country USA

4. FEI Number

59-3328788

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MARTOCCI, SUSAN J
5145 HONEYNUT LANE
WINDERMERE FL 34786

Name

MARTOCCI, SUSAN J.

Street Address (P.O. Box Number is Not Acceptable)

10000 SW 52 Ave #39

City

Gainesville

FL

Zip Code

32608

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Susan J Martocci
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4/29/04

FILE NOW!!! FEE IS \$150.00

After May 1, 2004 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE DP ☐ Delete
NAME MARTOCCI, SUSAN J
STREET ADDRESS 5145 HONEYNUT LANE
CITY-ST-ZIP WINDERMERE FL 34786

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE DVTS ☐ Delete
NAME BOUDREAUX, JACQUELYN F
STREET ADDRESS 5145 HONEYNUT LANE
CITY-ST-ZIP WINDERMERE FL 34786

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VD ☒ Delete
NAME BOUDREAUX, GERALD D
STREET ADDRESS 5145 HONEYNUT LANE
CITY-ST-ZIP WINDERMERE FL 34786

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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STREET ADDRESS
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/29/04

Date

Daytime Phone #